

FENCE APPLICATION

(PLEASE PRINT CLEARLY)

Permit #:

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Pro	lect.	Int	orm	atior	١
110	VUL	1111	CILL	uui	3

Street Address:				ti - ti	
Subdivision Name:		Section:	Lot:		Block:
Fence Height:	Project Value:				
Brief Summary of Work:					
Property Owner Information					
Property Owner:			Phone:		
Address:		City:		State:	Zip:
Contractor Information					
Contractor:					
Address:		_ City:		State:	Zip:
Contact Person:		Phone:		Fax:	
Email address:					
Permits cannot be issued wiDouble Permit fees will be is			ice of permits.		
You must attach a plot plan					
If any portion of the lot liesAll reinspection fees must be				cation and	an elevation certificate.
Structure shall not be occup				d a C.O. is	ssued.
 The Building Inspection Depared requirements and regulation complies with all applicable 	s that apply to your	property. It is you			

Permits Division, P.O. Box 319, Leander, Texas 78646-0319 Ph. (512) 528-2752, fax (512) 259-0660, http://www.leandertx.gov

Signature:	Date:
Signature.	Date.

Deck / Patio Cover Updated Jan. 12, 2011

Office Use C	Only		
Approved	Rejected	Ву	on
Resubmitted a	nd reviewed		
Approved	Rejected	Ву	on
Comments:			
Permit Fees:			
Review Fee: Fence Permit:			
Total Fees:			

Deck / Patio Cover Updated Jan. 12, 2011